



## REPLACEMENT SHEET

FILE	EDIT	VIEW	FAVORITES	TOOLS	HELP	
Address						Address <input type="text"/> <input type="button" value="△"/> <input type="button" value="▽"/> <input type="button" value="Go"/> <input type="button" value="Links"/>
<b>Gracious Table</b> Serving the kitchens of better chefs since 1975						Shopping Cart <input type="button" value="△"/> <input type="button" value="▽"/> Search <input type="button" value="△"/> <input type="button" value="▽"/> Products <input type="button" value="△"/> <input type="button" value="▽"/>
<b>Check Out: Checking Account Information</b>						<input type="button" value="△"/> <input type="button" value="▽"/>
Congratulations on choosing electronic check as your payment method. You will now be presented with a few easy steps for entering your checking account related information. Your first step is to enter your personal identification information that is required to process your payment. Most of this information should be entered as it appears on your checks.						<input type="button" value="△"/> <input type="button" value="▽"/>
<p>1 STEP</p> <p>Full Name: <input type="text" value="Matthew Thompson"/> <span style="float: right;">40</span> Enter just your name, even if multiple names appear on your check.</p> <p>Address: <input type="text" value="1313 Mockingbird Ln"/> <span style="float: right;">(optional)</span></p> <p>City: <input type="text" value="Fox Point"/> <span style="float: right;">44</span></p> <p>State: <input type="text" value="WI"/> <input type="button" value="△"/> <input type="button" value="▽"/></p> <p>Zip/ Postal Code: <input type="text" value="53217"/></p> <p>Country: <input type="text" value="United States"/> <input type="button" value="△"/> <input type="button" value="▽"/></p> <p>Phone Number: <input type="text" value="555 5555-5555"/></p> <p>Date of Birth: <input type="text" value="June"/> <input type="button" value="△"/> <input type="button" value="▽"/> <input type="text" value="1"/> <input type="button" value="△"/> <input type="button" value="▽"/> <input type="text" value="1970"/> <span style="float: right;">40</span></p> <p>Driver's License Number: <input type="text" value="K314-5667-777"/></p> <p>Driver's License State: <input type="text" value="WI"/> <input type="button" value="△"/> <input type="button" value="▽"/> <input type="button" value="Continue"/> <span style="float: right;">44</span></p>						<input type="button" value="△"/> <input type="button" value="▽"/>
Done						Local Intranet

FIG. 1A